

Notice of Completion & Environmental Document Transmittal

Appendix C

Mail to: State Clearinghouse, P. O. Box 3044, Sacramento, CA 95812-3044 (916) 445-0613

For Hand Delivery/Street Address: 1400 Tenth Street, Sacramento, CA 95814

SCH # _____

Project Title: _____

Lead Agency: _____ Contact Person: _____

Mailing Address: _____ Phone: _____

City: _____ Zip: _____ County: _____

Project Location:

County: _____ City/Nearest Community: _____

Cross Streets: _____ Zip Code: _____

Assessor's Parcel No.: _____ Section: _____ Twp.: _____ Range: _____ Base: _____

Within 2 Miles: State Hwy #: _____ Waterways: _____

Airports: _____ Railways: _____ Schools: _____

Document Type:

CEQA: ☐ NOP ☐ Draft EIR NEPA: ☐ NOI Other: ☐ Joint Document
☐ Early Cons ☐ Supplement/Subsequent EIR ☐ EA ☐ Final Document
☐ Neg Dec (Prior SCH No.) _____ ☐ Draft EIS ☐ Other _____
☐ Mit Neg Dec ☐ Other _____ ☐ FONSI

Local Action Type:

☐ General Plan Update ☐ Specific Plan ☐ Rezone ☐ Annexation
☐ General Plan Amendment ☐ Master Plan ☐ Prezone ☐ Redevelopment
☐ General Plan Element ☐ Planned Unit Development ☐ Use Permit ☐ Coastal Permit
☐ Community Plan ☐ Site Plan ☐ Land Division (Subdivision, etc.) ☐ Other _____

Development Type:

☐ Residential: Units _____ Acres _____ ☐ Water Facilities: Type _____ MGD _____
☐ Office: Sq.ft. _____ Acres _____ Employees _____ ☐ Transportation: Type _____
☐ Commercial: Sq.ft. _____ Acres _____ Employees _____ ☐ Mining: Mineral _____
☐ Industrial: Sq.ft. _____ Acres _____ Employees _____ ☐ Power: Type _____ MW _____
☐ Educational _____ ☐ Waste Treatment: Type _____ MGD _____
☐ Recreational _____ ☐ Hazardous Waste: Type _____
Total Acres (approx.) _____ ☐ Other: _____

Project Issues Discussed in Document:

☐ Aesthetic/Visual ☐ Fiscal ☐ Recreation/Parks ☐ Vegetation
☐ Agricultural Land ☐ Flood Plain/Flooding ☐ Schools/Universities ☐ Water Quality
☐ Air Quality ☐ Forest Land/Fire Hazard ☐ Septic Systems ☐ Water Supply/Groundwater
☐ Archeological/Historical ☐ Geologic/Seismic ☐ Sewer Capacity ☐ Wetland/Riparian
☐ Biological Resources ☐ Minerals ☐ Soil Erosion/Compaction/Grading ☐ Wildlife
☐ Coastal Zone ☐ Noise ☐ Solid Waste ☐ Growth Inducing
☐ Drainage/Absorption ☐ Population/Housing Balance ☐ Toxic/Hazardous ☐ Land Use
☐ Economic/Jobs ☐ Public Services/Facilities ☐ Traffic/Circulation ☐ Cumulative Effects
☐ Other _____

Present Land Use/Zoning/General Plan Designation:

Project Description: (please use a separate page if necessary)

Note: The State Clearinghouse will assign identification numbers for all new projects. If a SCH number already exists for a project (e.g. Notice of Preparation or previous draft document) please fill in.

Revised 2004

Reviewing Agencies Checklist

Appendix C, continued

Lead Agencies may recommend State Clearinghouse distribution by marking agencies below with and "X".
If you have already sent your document to the agency please denote that with an "S".

<input type="checkbox"/> Air Resources Board	<input type="checkbox"/> Office of Historic Preservation
<input type="checkbox"/> Boating & Waterways, Department of	<input type="checkbox"/> Office of Public School Construction
<input type="checkbox"/> California Highway Patrol	<input type="checkbox"/> Parks & Recreation
<input type="checkbox"/> Caltrans District # _____	<input type="checkbox"/> Pesticide Regulation, Department of
<input type="checkbox"/> Caltrans Division of Aeronautics	<input type="checkbox"/> Public Utilities Commission
<input type="checkbox"/> Caltrans Planning (Headquarters)	<input type="checkbox"/> Reclamation Board
<input type="checkbox"/> Coachella Valley Mountains Conservancy	<input type="checkbox"/> Regional WQCB # _____
<input type="checkbox"/> Coastal Commission	<input type="checkbox"/> Resources Agency
<input type="checkbox"/> Colorado River Board	<input type="checkbox"/> S.F. Bay Conservation & Development Commission
<input type="checkbox"/> Conservation, Department of	<input type="checkbox"/> San Gabriel & Lower L.A. Rivers and Mtns Conservancy
<input type="checkbox"/> Corrections, Department of	<input type="checkbox"/> San Joaquin River Conservancy
<input type="checkbox"/> Delta Protection Commission	<input type="checkbox"/> Santa Monica Mountains Conservancy
<input type="checkbox"/> Education, Department of	<input type="checkbox"/> State Lands Commission
<input type="checkbox"/> Energy Commission	<input type="checkbox"/> SWRCB: Clean Water Grants
<input type="checkbox"/> Fish & Game Region # _____	<input type="checkbox"/> SWRCB: Water Quality
<input type="checkbox"/> Food & Agriculture, Department of	<input type="checkbox"/> SWRCB: Water Rights
<input type="checkbox"/> Forestry & Fire Protection	<input type="checkbox"/> Tahoe Regional Planning Agency
<input type="checkbox"/> General Services, Department of	<input type="checkbox"/> Toxic Substances Control, Department of
<input type="checkbox"/> Health Services, Department of	<input type="checkbox"/> Water Resources, Department of
<input type="checkbox"/> Housing & Community Development	<input type="checkbox"/> Other _____
<input type="checkbox"/> Integrated Waste Management Board	<input type="checkbox"/> Other _____
<input type="checkbox"/> Native American Heritage Commission	
<input type="checkbox"/> Office of Emergency Services	

Local Public Review Period (to be filled in by lead agency)

Starting Date _____ Ending Date _____

Lead Agency (Complete if applicable):

Consulting Firm: _____	Applicant: _____
Address: _____	Address: _____
City/State/Zip: _____	City/State/Zip: _____
Contact: _____	Phone: _____
Phone: _____	

Signature of Lead Agency Representative: _____ Date: _____